WATER WELL RECORD Form WWC-5

Division of Water Resources; App. No.

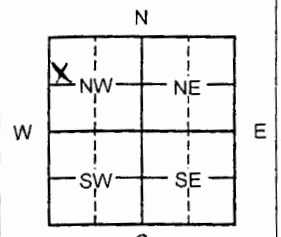
1 LOCATION OF WATER WELL: County: Geary | Fraction: SW ¼ NW ¼ NW ¼ | Section Number: 24 | Township Number: T 12 S | Range Number: R 4 E

Distance and direction from nearest town or city street address of well if located within city? 2413 S. Milford Lake Road, Junction City, KS

Global Positioning System (decimal degrees, min. of 4 digits)
Latitude: NA
Longitude: NA
Elevation: NA
Datum: above mean sea level
Data Collection Method: legal survey

2 WATER WELL OWNER: KDHE-BER
RR#, St. Address, Box # : 1000 SW Jackson, Ste 410
City, State, ZIP Code : Topeka, KS 66612-1367

3 LOCATE WELL'S LOCATON WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL 31.5 ft.
MW1
Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.
WELL'S STATIC WATER LEVEL 24.80 ft. below land surface measured on mo/day/yr 8/4/09
Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
2 Irrigation 4 Industrial 7 Domestic (lawn & garden) (10) Monitoring well _____
Was a chemical/bacteriological sample submitted to Department? Yes ____ No X ; If yes, mo/day/yrs
Sample was submitted _____ Water Well Disinfected? Yes ____ No X

5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued ____ Clamped ____
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded ____
(2) PVC 4 ABS 7 Fiberglass _____ Threaded X
Blank casing diameter 2 in. to 16.5 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
Casing height below land surface NA ft., Weight _____ lbs./ft. Wall thickness or gauge No. _____
TYPE OF SCREEN OR PERFORATION MATERIAL:
1 Steel 3 Stainless steel 5 Fiberglass (7) PVC 9 ABS 11 Other (specify) _____
2 Brass 4 Galvanized steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:
1 Continuous slot (3) Mill slot 5 Gauze wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) _____

SCREEN-PERFORATED INTERVALS:	From	16.5 ft.	to 31.5 ft.	From	ft.	to ft.	
	From	ft.	to ft.	From	ft.	to ft.	
GRAVEL PACK INTERVALS:	From	14.5 ft.	to 31.5 ft.	From	ft.	to ft.	
	From	ft.	to ft.	From	ft.	to ft.	

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout (3) Bentonite (4) Other Concrete: 0-2 ft.
Grout Intervals From 2 ft. to 14.5 ft. From ____ ft. to ____ ft. From ____ ft. to ____ ft.
What is the nearest source of possible contamination:
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify below)
2 Sewer lines 5 Cess pool 8 Sewage lagoon (11) Fuel storage 14 Abandoned water well
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/ gas well
Direction from well? Well is within source area How many feet? ~0 ft.

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	3	Limestone gravel with poorly sorted	20	25	Shaley limestone, weathered, red, nearly dry
		sand, some silt, dry, no odor			no odor
3	5	Sandy clay, brown, very fine, some	25	33	Shaley limestone, weathered, olive tan,
		limestone gravel, moist, no odor			nearly dry, no odor
5	10	Clayey sand, brown, medium grained,			
		moist, sticky, no odor			Total Well Depth: 31.5 ft.
10	15	No recovery			Total Boring Depth: 33 ft.
15	20	Shaley limestone, weathered, light olive,			
		nearly dry, no odor			Flushmount waiver from BOW

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 8/3/09 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 757. This Water Well Record was completed on (mo/day/year) 8/18/09 under the business name of Larsen & Associates, Inc. by (signature) _____

INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of $5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell

KSA 82a-1212